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## BIB DATA SHEET

CONFIRMATION NO. 2257

<b>SERIAL NUMBER</b> 10/585,237	<b>FILING or 371(c) DATE</b> 06/29/2006 <b>RULE</b>	<b>CLASS</b> 623	<b>GROUP ART UNIT</b> 3733	<b>ATTORNEY DOCKET NO.</b> ARTHP120US		
<b>APPLICANTS</b> Henning Kloss, Schweiz, GERMANY; Killian Kraus, Werneck, GERMANY; Bjorn Schafer, Ruppichterorth, GERMANY;						
<b>** CONTINUING DATA *****</b> AY This application is a 371 of PCT/DE04/02839 12/31/2004 which claims benefit of 60/534,344 01/06/2004						
<b>** FOREIGN APPLICATIONS *****</b> AY GERMANY 103 61 772.8 12/31/2003						
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY **</b> 04/02/2007						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/ANDREW YANG/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWINGS</b> 4	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> AMIN, TUROCY & CALVIN, LLP 1900 EAST 9TH STREET, NATIONAL CITY CENTER 24TH FLOOR, CLEVELAND, OH 44114 UNITED STATES						
<b>TITLE</b> Intervertebral disk implant						
<b>FILING FEE RECEIVED</b> 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			